

Building Trauma Informed Systems and Practices for Children and Families in the Child Welfare System

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NCTSN

The National Child
Traumatic Stress Network



National Child Traumatic Stress Network Mission Statement

The mission of the National Child Traumatic Stress Network (NCTSN) is to *raise the standard of care* and *improve access* to services for traumatized children, their families and communities throughout the United States.

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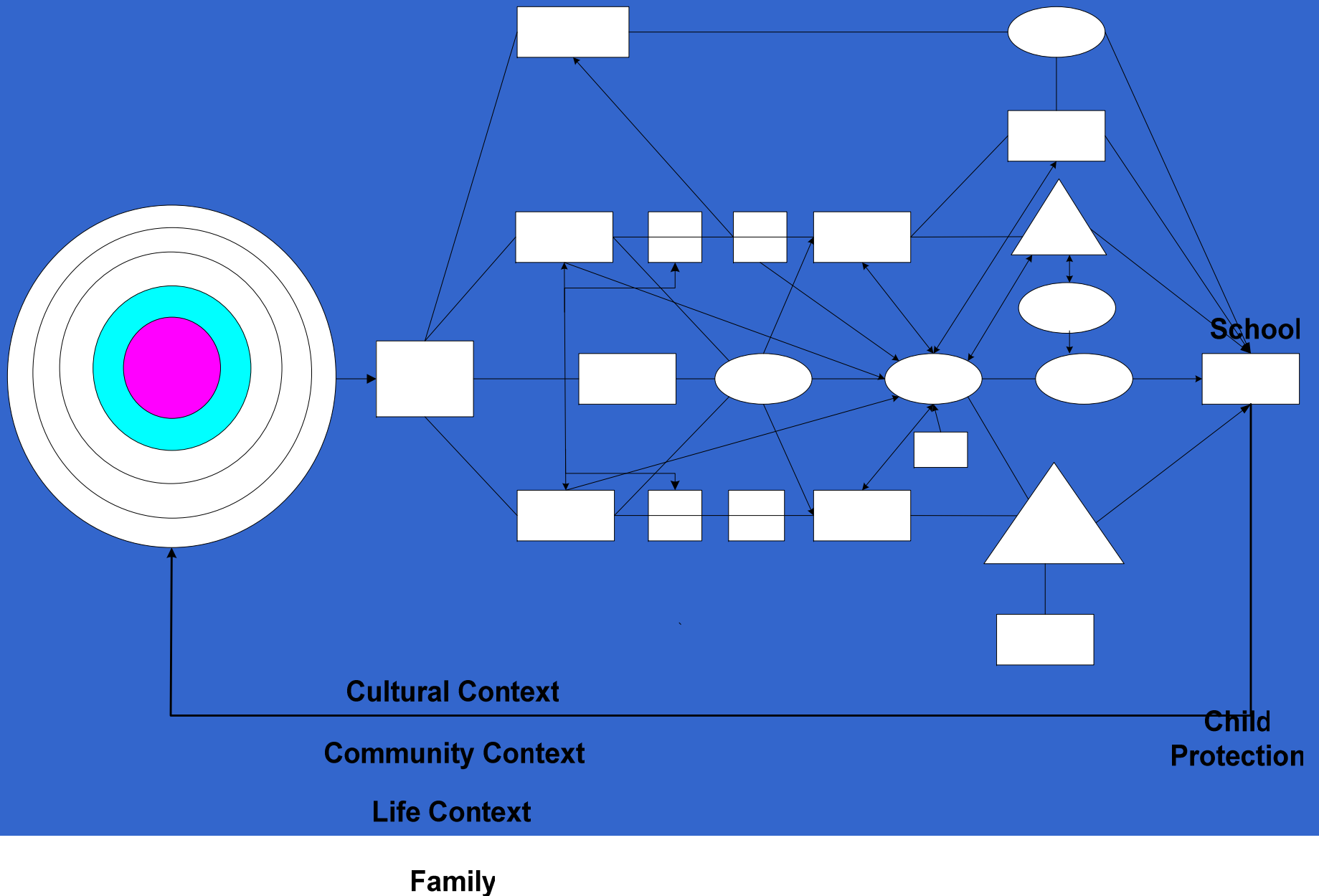
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What is a Trauma Informed Child Welfare System?

- Understand the impact of childhood traumatic stress on the children served by the Child Welfare system
- Understand how the system can help mitigate the impact of trauma or can add new traumatic experiences
-

Emotional Chain of Custody



What is a Trauma Informed Child Welfare System? (continued)

- Understand the impact of trauma on the families with whom child welfare workers interact.
- Understand the impact of vicarious trauma on the child welfare workforce including line staff and resource parents.
- Understand the exposure to trauma as part of the child welfare job.
- Understand how trauma has shaped the culture of child welfare the same way trauma shapes the world view of child victims.



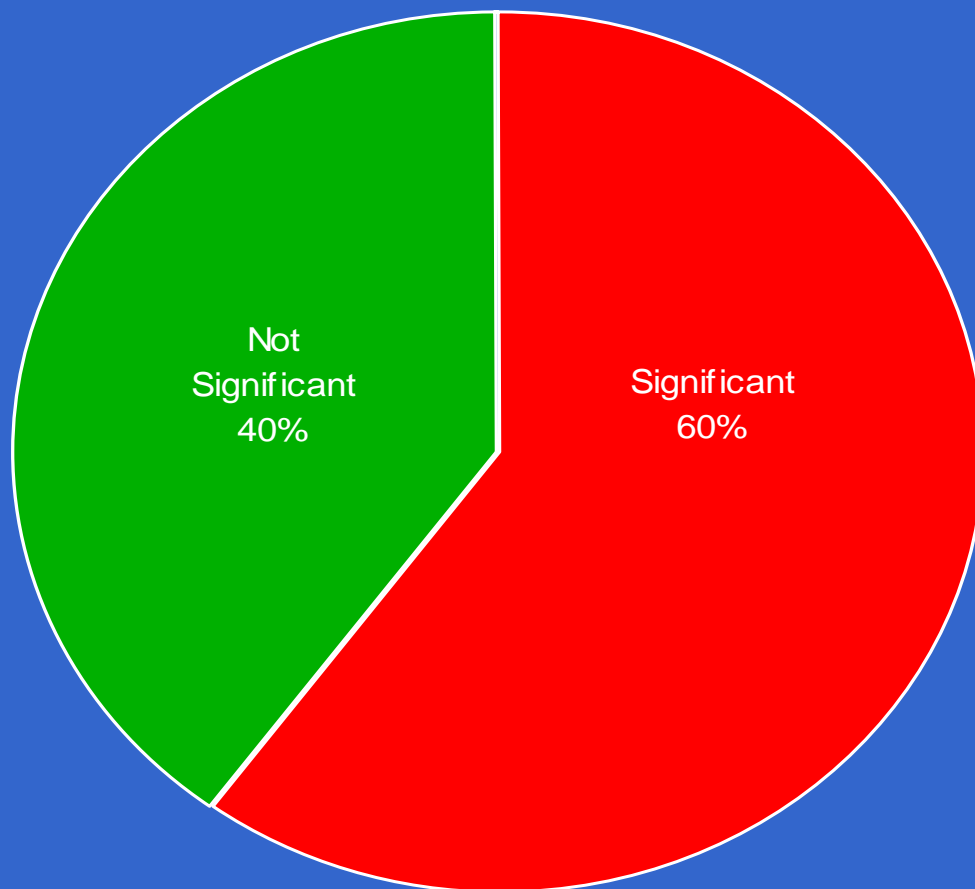
Exposure to occupational stressors

	% witnessing event (N=49)
Dangerous neighborhood	92
Drug abuse by client	90
Poverty and homelessness	86
Physical abuse of child	84
Educational neglect	84
Poverty and lack of food	80
Sexual abuse of child	78
Criminal activity by client	76
Poverty and lack of healthcare	69
Death of a client due to illness	47
Death of a client due to accident	33
Death of a client due to unknown cause	33
Death of a client due to murder	24

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Work-related PTSD symptoms



- 182 NYC ACS workers completed the Impact of Event Scale (IES). Items include:
 - Pictures of it popped into my mind
 - I stayed away from reminders of it
- 1 week after the most distressing work-related event, 60% reported clinically significant PTSD symptoms (IES score > 26)

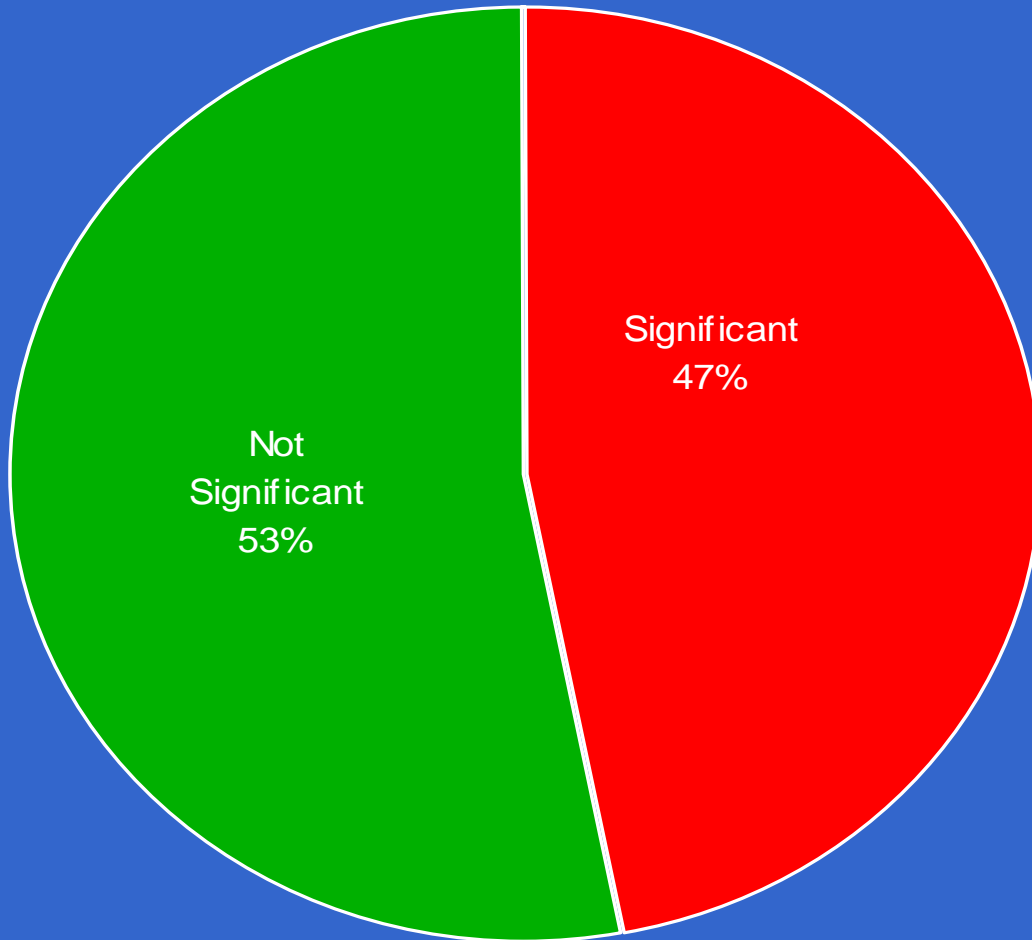
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Work-related PTSD symptoms



- Of those reporting significant symptoms after the event, 47% (n=52) continued to experience clinically significant PTSD symptoms in the week preceding the evaluation, an average of 2.15 years later

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What is a Trauma Informed Child Welfare System? (continued)

- Have realistic and practical actions that can be taken at all levels of the system to make meaningful use of that understanding to make it better for the children, families, and workforce.

Children's Mental Health and Child Welfare

Evidence Practice Movement



2000's Trauma Mental
Health-Trauma Specific Providers

**1990's Mental Health for
Externalizing Behavior- SED/Therapeutic
placements**

**1980's Mental Health for Sexual Abused Children
Any Mental Health Provider Would Do**

**1970's Mental Health of Parents-for Safety and Permanence
Referral to Traditional Mental Health System**

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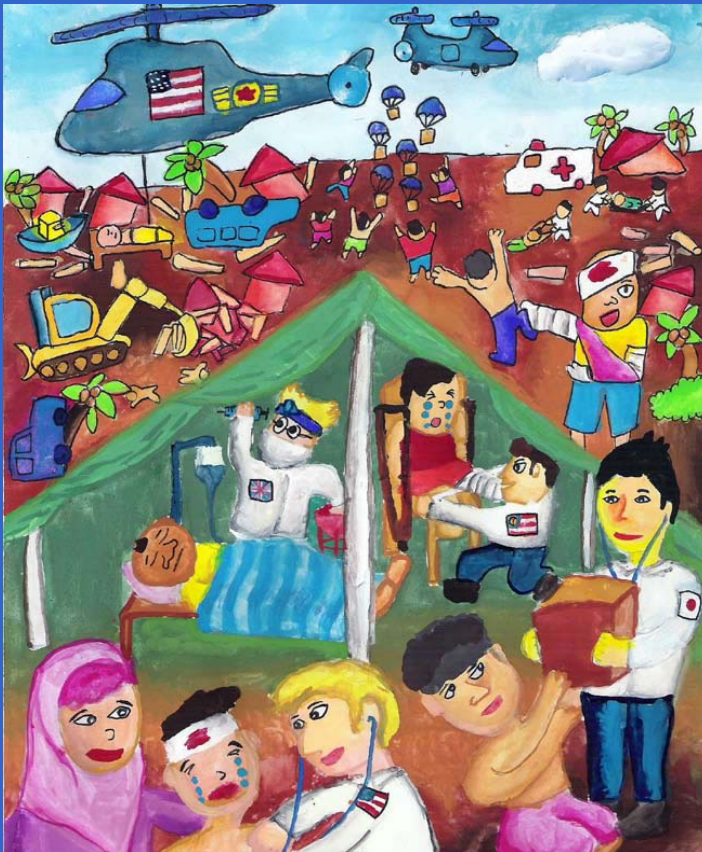
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What Is Child Traumatic Stress?



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What Is Child Traumatic Stress?

- Child traumatic stress refers to the *physical and emotional responses* of a child to events that threaten the life or physical integrity of the child or of someone critically important to the child (such as a parent or sibling).
- Traumatic events overwhelm a child's capacity to cope and elicit feelings of terror, powerlessness, and out-of-control physiological arousal.

What Is Child Traumatic Stress, cont'd

- A child's response to a traumatic event may have a profound effect on his or her perception of self, the world, and the future.
- Traumatic events may affect a child's:
 - Ability to trust others
 - Sense of personal safety
 - Effectiveness in navigating life changes

Types of Traumatic Stress

- **Acute trauma** is a single traumatic event that is limited in time.
- **Chronic trauma** refers to the experience of multiple traumatic events.
- **Complex trauma** describes both exposure to chronic trauma—usually caused by adults entrusted with the child’s care—and the impact of such exposure on the child.

Variability, cont'd

- The impact of a potentially traumatic event depends on several factors, including:
 - The child's age and developmental stage
 - The child's perception of the danger faced
 - Whether the child was the victim or a witness
 - The child's relationship to the victim or perpetrator
 - The child's past experience with trauma
 - The adversities the child faces following the trauma
 - The presence/availability of adults who can offer help and protection

Effects of Trauma Exposure, cont'd

- **Attachment.** Traumatized children feel that the world is uncertain and unpredictable. They can become socially isolated and can have difficulty relating to and empathizing with others.
- **Biology.** Traumatized children may experience problems with movement and sensation, including hypersensitivity to physical contact and insensitivity to pain. They may exhibit unexplained physical symptoms and increased medical problems.
- **Mood regulation.** Children exposed to trauma can have difficulty regulating their emotions as well as difficulty knowing and describing their feelings and internal states.

Effects of Trauma Exposure, cont'd

- **Dissociation.** Some traumatized children experience a feeling of detachment or depersonalization, as if they are “observing” something happening to them that is unreal.
- **Behavioral control.** Traumatized children can show poor impulse control, self-destructive behavior, and aggression towards others.
- **Cognition.** Traumatized children can have problems focusing on and completing tasks, or planning for and anticipating future events. Some exhibit learning difficulties and problems with language development.
- **Self-concept.** Traumatized children frequently suffer from disturbed body image, low self-esteem, shame, and guilt.

Acute Impact of Trauma

- Development
- Educational Performance
- Social Relationships
- Behavior

Childhood Trauma and Other Diagnoses

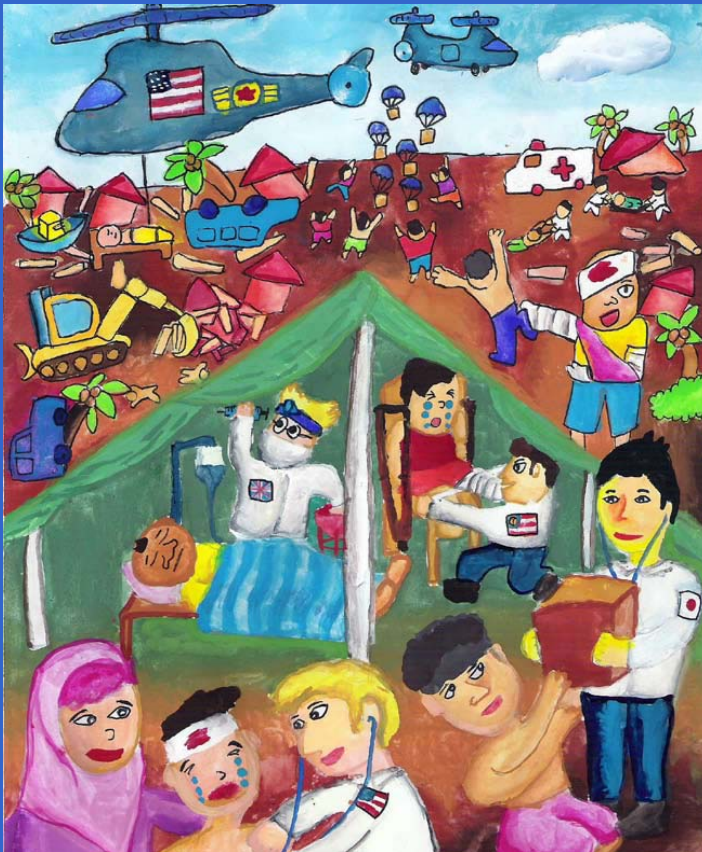
- Other common diagnoses for children in the child welfare system include:
 - Reactive Attachment Disorder
 - Attention Deficit Hyperactivity Disorder
 - Oppositional Defiant Disorder
 - Bipolar Disorder
 - Conduct Disorder
- These diagnoses generally do not capture the full extent of the developmental impact of trauma.
- Many children with these diagnoses have a complex trauma history.

Long Term Impact
ACE Pyramid
CDCP 2006



Call for a Trauma Informed Child Welfare System

What realistic and practical actions can be taken at all levels of the system to make meaningful use of that understanding to make it better for the children, families, and workforce.



Artwork courtesy of the International Child Art Foundation (www.icaaf.org)

Essential Elements of Trauma-Informed Child Welfare Practice

1. Maximize the child's sense of safety.
2. Assist children in reducing overwhelming emotion.
3. Help children make new meaning of their trauma history and current experiences.
4. Address the impact of trauma and subsequent changes in the child's behavior, development, and relationships.
5. Coordinate services with other agencies.

Essential Elements of Trauma-Informed Child Welfare Practice

6. Utilize comprehensive assessment of the child's trauma experiences and their impact on the child's development and behavior to guide services.
7. Support and promote positive and stable relationships in the life of the child.
8. Provide support and guidance to child's family and caregivers.
9. Manage professional and personal stress.

What Makes the Essential Elements “Essential”?



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Essential Element #1: Maximize the child's sense of safety.

- Traumatic stress overwhelms a child's sense of safety and can lead to a variety of survival strategies for coping.
- Safety implies both *physical* safety and *psychological* safety.
- A sense of safety is critical for functioning as well as physical and emotional growth.
- While inquiring about emotionally painful and difficult experiences and symptoms, workers must ensure that children are provided a psychologically safe setting.

Essential Element #2: Assist children in reducing overwhelming emotion.

- Trauma can elicit such intense fear, anger, shame, and helplessness that the child feels overwhelmed.
- Overwhelming emotion may delay the development of age-appropriate self-regulation.
- Emotions experienced prior to language development maybe be very real for the child but difficult to express or communicate verbally.
- Trauma may be “stored” in the body in the form of physical tension or health complaints.

Essential Element #3: Help children make new meaning of their trauma history and current experiences.

- Trauma can lead to serious disruptions in a child's sense of safety, personal responsibility, and identity.
- Distorted connections between thoughts, feelings, and behaviors can disrupt encoding and processing of memory.
- Difficulties in communicating about the event may undermine a child's confidence and social support.
- Child welfare workers must help the child feel safe, so he or she can develop a coherent understanding of traumatic experiences.

Essential Element #4

Address the impact of trauma and subsequent changes in the child's behavior, development, and relationships.

- Traumatic events affect many aspects of the child's life and can lead to secondary problems (e.g., difficulties in school and relationships, or health-related problems).
- These “secondary adversities” may mask symptoms of the underlying traumatic stress and interfere with a child's recovery from the initial trauma.
- Secondary adversities can also lead to changes in the family system and must be addressed prior to or along with trauma-focused interventions.

Essential Element #5: Coordinate services with other agencies.

- Traumatized children and their families are often involved with multiple service systems. Child welfare workers are uniquely able to promote cross-system collaboration.
- Service providers should try to develop common protocols and frameworks for documenting trauma history, exchanging information, coordinating assessments, and planning and delivering care.
- Collaboration enables all helping professionals to view the child as a whole person, thus preventing potentially competing priorities.

Essential Element #6:

Utilize comprehensive assessment of the child's trauma experiences and its impact on the child's development and behavior to guide services.

- Thorough assessment can identify a child's reactions and how his or her behaviors are connected to the traumatic experience.
- Thorough assessment can also predict potential risk behaviors and identify interventions that will ultimately reduce risk.
- Child welfare workers can use assessment results to determine the need for referral to appropriate trauma-specific mental health care or further comprehensive trauma assessment.

Essential Element #7: Support and promote positive and stable relationships in the life of the child.

- Separation from an attachment figure, particularly under traumatic and uncertain circumstances, is highly stressful for children.
- Familiar and positive figures—teachers, neighbors, siblings, relatives—play an important role in supporting children who have been exposed to trauma.
- Minimizing disruptions in relationships and placements and establishing permanency are critical for helping children form and maintain positive attachments.

Essential Element #8: Provide support and guidance to the child's family and caregivers.

- Resource families have some of the most challenging roles in the child welfare system.
- Resource families must be nurtured and supported so they, in turn, can foster safety and well-being.
- Relatives serving as resource families may themselves be dealing with trauma related to the crisis that precipitated child welfare involvement and placement.

Essential Element #9: Manage professional and personal stress.

- Child welfare is a high-risk profession, and workers may be confronted with danger, threats, or violence.
- Child welfare workers may empathize with victims; feelings of helplessness, anger, and fear are common.
- Child welfare workers who are parents, or who have histories of childhood trauma, might be at particular risk for experiencing such reactions.

What Can a Child Welfare Worker Do?

- Recognize that exposure to trauma is the rule, not the exception, among children in the child welfare system.
- Recognize the signs and symptoms of child traumatic stress and how they vary in different age groups.
- Recognize that children's "bad" behavior is sometimes an adaptation to trauma.
- Understand the impact of trauma on different developmental domains.

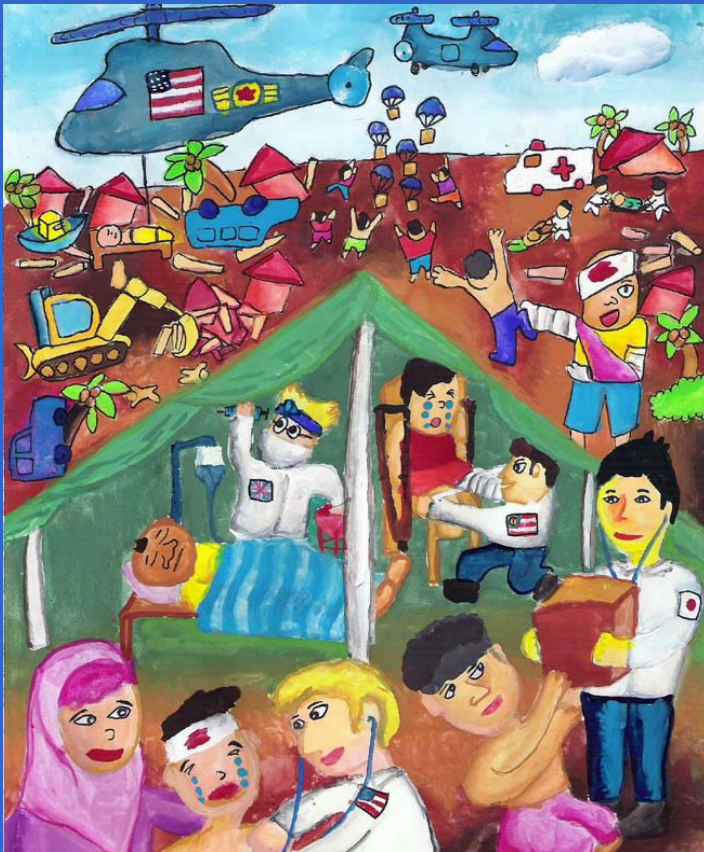
What Can a Child Welfare Worker Do? cont'd

- Understand the cumulative effect of trauma.
- Gather and document psychosocial information regarding all traumas in the child's life to make better-informed decisions.
- Assist parents and caregivers who have secondary adversities and traumatic experiences of their own.
- Make a special effort to integrate cultural practices and culturally responsive mental health services.
- Identify and build on foster parent and caregiver protective factors.

What Can a Child Welfare Worker Do?, cont'd

- Recognize that child welfare system interventions have the potential to either exacerbate or decrease the impact of previous traumas.
- Lessen the risk of system-induced secondary trauma by serving as a protective and stress-reducing buffer for children:
 - Develop *trust* with children through listening, frequent contacts, and honesty in order to mitigate previous traumatic stress.
 - Avoid repeated interviews, especially about experiences of sexual abuse.
 - Avoid making professional promises that, if unfulfilled, are likely to increase traumatization.

Trauma Informed Treatment Lessons form Evidence Based Practice:



Artwork courtesy of the International Child Art Foundation (www.icaf.org)

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Core Components of Trauma-Informed, Evidence-Based Treatment

- Building a strong therapeutic relationship
- Psychoeducation about normal responses to trauma
- Parent support, conjoint therapy, or parent training
- Emotional expression and regulation skills
- Anxiety management and relaxation skills
- Cognitive processing or reframing

Core Components of Trauma-Informed, Evidence-Based Treatment, cont'd

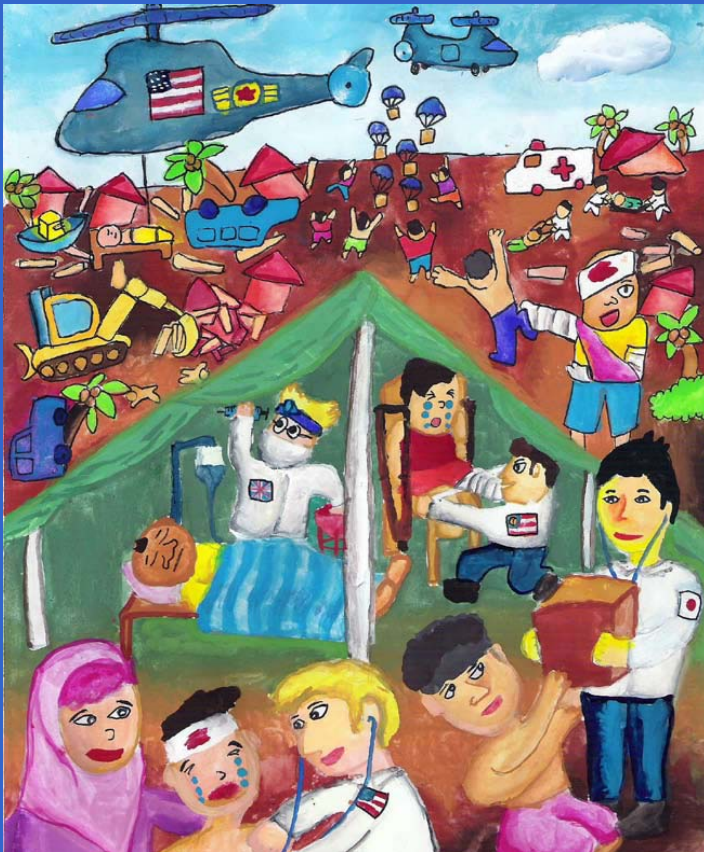
- Construction of a coherent trauma narrative
- Strategies that allow exposure to traumatic memories and feelings in tolerable doses so that they can be mastered and integrated into the child's experience
- Personal safety training and other important empowerment activities
- Resilience and closure

**Interventions such as the Evidence Based "Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT)" utilize these components as a standard part of treatment*

Questions to Ask Therapists/ Agencies That Provide Services

- Do you provide trauma-specific or trauma-informed therapy? If so, how do you determine if the child needs a trauma-specific therapy?
- How familiar are you with evidence-based treatment models designed and tested for treatment of child trauma-related symptoms?
- How do you approach therapy with traumatized children and their families (regardless of whether they indicate or request trauma-informed treatment)?
- Describe a typical course of therapy (e.g., can you describe the core components of your treatment approach?).

Child Welfare Trauma Training Toolkit:



Artwork courtesy of the International Child Art Foundation (www.icaf.org)

Child Welfare Training Toolkit Overview

- Educate child welfare professionals about the impact of trauma on the development and behavior of children.
- Educate child welfare professionals about when and how to intervene directly in a trauma-sensitive manner and through strategic referrals.
- Assure that all children in the child welfare system will have access to timely, quality, and effective trauma-focused interventions and a case planning process that supports resilience in long-term healing and recovery.

Child Welfare Training Toolkit Overview, Cont'd

- Assist child welfare workers in achieving the Child and Family Services Review (CFSR) goals of ensuring that all children involved in the nation's child welfare system achieve a sense of:
 - Safety
 - Permanency
 - Well-being
- Full toolkit can be downloaded from http://www.nctsn.org/nccts/nav.do?pid=ctr_cwtool

Resources

- www.nctsn.net (National Child Traumatic Stress Network)
- www.ChadwickCenter.org (Chadwick)
- www.musc.edu/cvc/ (TF-CBT on-line and OVC guidelines)
- www.cachildwelfareclearinghouse.org (Online Evidence Based Practice Resource Designed for Public Child Welfare Professionals- With Support from California Department of Social Services)